

HPP 2017 - 2022 Capability 3

Continuity of Healthcare

Service Delivery



Objective 1 - 7 with Activities

Healthcare organizations, with the support from HCC and the Emergency Support Function-8 (ESF-8) lead agency, provide uninterrupted, optimal medical care to all populations in the face of damaged or disabled healthcare infrastructure.

Objective 1: Identify Essential Functions for Healthcare Delivery

— Key Healthcare functions include clinical services and infrastructure:

- Pre-hospital care
- Inpatient services
- Outpatient care
- Skilled nursing facilities and long-term care facilities
- Home care
- Laboratory
- Radiology
- Pharmacy
- Supply chain management
- Facility infrastructure
- Utilities (water, electricity, gas, sewer, fuel)
- Medical gases
- Air handling systems (HVAC)
- Telecommunications
- Information Technology
- Central supply
- Transportation services
- Nutrition and dietary services
- Security
- Laundry
- Human Resources

Objective 2: Plan for Continuity of Operations

HCC should have a plan to maintain its own operations

The HCC and healthcare organizations should consider what disaster risk reduction strategies should be implemented in order to lessen the likelihood of complete and total failure. HCC should promote a regional approach to addressing critical infrastructure and should incorporate COOP into their routine exercises.

Activity 1: Develop a Healthcare Organization Continuity of Operations (COOP) Plan

- The COOP Plan may be an annex to Emergency Operations Plan (EOP) and during response should be addressed under the incident command system (ICS) and include:
 - Activation/Response Functions
 - Supervisor/Managerial points of contact for each department
 - Orders of succession and delegations of authority
 - Immediate actions/assessments to be performed in case of disruptions
 - Safety assessment/resource inventory to determine if healthcare organizations can continue to operate
 - Redundant, replacement, or supplemental resources
 - Strategies and priorities for addressing disruptions

Activity 2: Develop a Healthcare Coalition COOP Plan

- HCC COOP plan should include strategies for communications and leadership continuity
- Should coordinate with the ESF-8 lead agency and should ensure communication and coordination systems for ICS are adequately secured
- HCC COOP plan should detail orders of succession and delegations of authority, and a suitable number of personnel (ideally not from the same organization) should be trained to carry out HCC coordination activities

Activity 3: Continue Administrative and Finance Functions

Activity 4: Plan for Healthcare Organization Sheltering-in-Place and should consider the following:

- Decision making criteria and authorities
- Identification of patient/non-patient care locations to provide protection from the external environment
- Operational procedures for shutting down HVAC, lock-down, and access control
- Assessment of internal capabilities and needs
- Acquisition of supplies, equipment, pharmaceuticals, other necessary resources for sustainment (e.g. food/water or childrens materials)
- Internal/external communications plans
- Triggers for lifting shelter-in-place orders

Objective 3: Maintain Access to Non-Personnel Resources during an Emergency

 HCC should examine its supply chain vulnerabilities by collaborating with manufacturers and distributors to determine access to critical supplies, amounts available in regional systems, and potential alternative delivery options in case access or infrastructure is compromised and share with the ESF-8:

- Blood banks
- Medical gas suppliers
- Fuel suppliers
- Nutritional suppliers and food vendors
- Pharmaceutical vendors
- Leasing entities for biomedical (monitors, ventilators,) durable medical equipment and beds
- Manufacturers and distributors for disposable supplies
- Manufacturers and distributors for PPE
- Hazardous waste removal services

Activity 2: Assess and Address Equipment, Supply, and Pharmaceutical Requirements

____ Certain categories of pharmaceuticals and medical material are more likely to be required during a patient surge, such as:

- Pharmaceuticals
 - Analgesia and sedation medications
 - Anesthesia medications
 - Antibiotics
 - Antivirals
 - Tetanus vaccine
 - Pressor medications
 - Respiratory medications
 - Antidotes
 - Psychotropic medications
- Medical Supplies and equipment
 - Blood products
 - Intravenous fluids/infusion pumps
 - Ventilators
 - Bedside monitors
 - Airway suction for all populations
 - Surgical supplies
 - Supplies to administer pharmaceuticals
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Objective 4: Develop Strategies to Protect Healthcare Information Systems and Networks

— *Cyberattacks on healthcare organizations have had significant effects on every aspect of patient care and organizational continuity. With increasing reliance on information systems, and networked medical devices, there is potential risk to their integrity and safety.*

Healthcare organizations, assisted by their regional HCC, should explore industry cybersecurity standards, guidelines, and leading practices necessary to protect these systems (e.g. National Institute of Standards and Technology Cybersecurity Framework-Framework for Improving Critical Infrastructure Cybersecurity).

Leading Practices for Protecting Healthcare Information Systems and Networks:

- Conduct computer network assessment to obtain information necessary to develop a cybersecurity plan to reduce vulnerabilities and breaches
- Encrypting all computers and mobile devices
- Pre-approving use of devices not issued by organization
- Implementing role-based access to systems, only employees have access
- Configuring EHR system/database to require access permissions
- Develop security policies for the virtual private network (VPN)
- Implementing cybersecurity and continuity training and enforcement policies
- Include appropriate IT personnel and considerations in EOPs, training, exercises
- Engage outside partners (e.g., law enforcement, regulatory agencies, IT security)
- Develop mechanisms for IT personnel to obtain cybersecurity information
- Become member in information sharing/analysis organ. (ISAOs)

Objective 5: Protect Responders' Safety and Health

The safety and health of clinical and non-clinical personnel are high priorities for preparedness and continuity as effective care cannot be delivered without available staff.

HCC should develop processes to implement to equip, train, and provide resources necessary to protect responders, employees, and their families from hazards during response and recovery operations.

Activity 1: Distribute Resources Required to Protect Healthcare Worker:

- Healthcare organization should be prepared to distribute Medical Counter Measures (MCMs) using a closed point of dispensing (POD), pharmaceutical prophylaxis
- Personal protective equipment (PPE), e.g., respirators, protective clothing, gloves, face shields, etc. should be available
- HCC should promote regional PPE procurement that could offer significant advantages in pricing and consistency for staff, especially when shared across healthcare organizations

Activity 2: Train and Exercise to Promote Responders Safety and Health:

- Integrate responder safety/health policy development, training with existing occupational health/infection control programs
- Plan for pre-hospitalized decontamination, ensure coordination all healthcare organizations
- Create hazardous material (HZMAT) plans with trainings include appropriate staff and use of PPE
- Provide training for healthcare providers
- Work with human resource departments to develop readiness policies
- Maintain PPE in a state readiness, ensure inventory is updated and adequate for staffing demands

Activity 3: Develop Healthcare Worker Resilience:

- Pre-emergency resilience building, encourage healthy lifestyle, develop family emergency plans, conduct staff training for active shooter events
- Emergency resilience support, rotate staff to limit fatigue, provide support of staff (child care)
- Post-emergency support, provide psychological first aid, information on expected stress, self and peer-assessment and monitoring activities
- Ongoing health and safety monitoring activities, determine which responders should be part of long-term physical and behavioral health monitoring study/evaluation

Objective 6: Plan for and Coordinate Healthcare Evacuation and Relocation

Activity 1: Develop and Implement Evacuation/Relocation Plans:

- Planning considerations:
 - Establish authority for decision-making processes
 - Ensure internal/external communications
 - Identify appropriate relocation/evacuation staging areas within facility
 - Integrate all organizations plans with local and regional patient movement
 - Identify situations for early discharge
 - Identify available destination facilities and their ability to expand existing services to receive patients from evacuating facilities
 - Establish processes for when patients cannot be moved
 - Establish procedures for facility closure

Activity 2: Develop and Implement Evacuation Transportation Plans:

- Articulate HCCs role in coordinating EMS assistance
- Process to appoint transport manager under ICS operations
- Identify coordinating entity for public and private EMS agencies (air and ground)
- Identify transportation assets including non-medical transportation partners
- Identify processes to access specialized transportation assets through EMOs (National Guard, tractors, boats, buses)
- Consider age-and-size related transport equipment needs
- Develop process to track patients and staff during transport
- Establish process for transport partners to communicate
- Establish process to communicate with patients families when transferring

Activity 3: Facilitate Recovery Assistance and Implementation:

- Assist HCC members with government processes for reimbursement, reconstitution, and resupply in concert with regional EMOs and ESF-8 partners
- Convene platform to identify long-term care/community health recovery gaps
- Develop and communicate short-and-long-term priorities of regional jurisdictions
- Collaborate with EMOs and government officials to identify opportunities for future mitigation strategies or initiatives to enhance resilience of physical healthcare infrastructure

Healthcare organizations and HCCs should ensure that their ICS prepares for a return to normal operations by:

- Identify and prepare documentation necessary for government assistance
- Access damaged infrastructure and impacted patient care services
- Support physical/behavioral health needs of affected patients, staff, families
- Connecting patient and staff with case management/financial services
- Planning the after-action learning and improvement processes

Need More information?

Contact: Carolyn Elliott, Healthcare Coalition Coordinator

Colorado Department of Public Health and Environment-Office of Emergency Response and Preparedness

Email: carolyn.elliott@state.co.us

Phone: 303-692-3020 Office

720-591-8652 Cell

